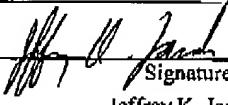


SEP 30 2004

<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b>		Docket Number: CM01730G
In re Application of	Timothy J. Wilson	
Application Number	09/490,979	Filed January 24, 2000
For	METHOD AND SYSTEM FOR WIRELESS COMMUNICATIONS USING DIFFERENT MODULATION TECHNIQUES TO PROVIDE GUARD TIMES	
Group Art Unit	2634	Examiner Ha, Dac V.
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above-identified application.		
The requested extension and appropriate non-small-entity fee are as follows: (Check time period desired):		
<input checked="" type="checkbox"/>	One Month (37 CFR 1.17(a)(1))	\$ 110.00
<input type="checkbox"/>	Two Months (37 CFR 1.17(a)(2))	\$ 420.00
<input type="checkbox"/>	Three Months (37 CFR 1.17(a)(3))	\$ 950.00
<input type="checkbox"/>	Four Months (37 CFR 1.17(a)(4))	\$ 1480.00
<input type="checkbox"/>	Five Months (37 CFR 1.17(a)(5))	\$ 2010.00
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the amount shown above is reduced by one-half, and the resulting fee is \$ _____		
<input type="checkbox"/> A check in the amount of the fee is enclosed.		
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.		
<input checked="" type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.		
<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required or credit any overpayment to Deposit Account Number 502117		
<input checked="" type="checkbox"/> I have enclosed a duplicate copy of this sheet.		
I am the:		
<input type="checkbox"/> Applicant/inventor		
<input type="checkbox"/> Assignee of record of the entire interest. See 37 CFR 3.71.		
<input checked="" type="checkbox"/> Attorney or agent of record (Registration No.: 44,798 )		
<input type="checkbox"/> Attorney or agent under 37 CFR 1.34(a) Registration number if acting under 37 CFR 1.34(a) 44,798		
<u>September 30, 2004</u>		 Signature
Date		Jeffrey K. Jacobs
Type or printed name		
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.		
<input checked="" type="checkbox"/> Total of 1 form(s) are submitted		
<b>CERTIFICATE OF MAILING</b>		
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first-class mail in an envelope addressed to: Mail Stop RCE, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450 on this date: September 30, 2004		
Typed or printed name		Nanette Orr
Signature		

## FEE

## TRANSMITTAL

Patent fees are subject to annual revision

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

(\$)

Application Number	09/490,979
Filing Date	January 24, 2000
First Named Inventor	Timothy J. Wilson
Examiner Name	Ha, Dac V.
Group Art Unit	2634
TOTAL AMOUNT OF PAYMENT	(\$)
Attorney Docket No.	CM01730G

## METHOD OF PAYMENT (check all that apply)

 Check  Credit card  Money Order  Other  None Deposit Account:Deposit Account Number **502117**Deposit Account Name **Motorola, Inc.**

The Director is authorized to: (check all that apply)

Charge fee(s) indicated below  Credit any overpayments

Charge any additional fee(s) during the pendency of this application

Charge fees(s) indicated below, except for the filing fee to the above-identified deposit account.

## FEE CALCULATION (continued)

## 3. ADDITIONAL FEES

Large Entity Fee Code	Fee (\$)	Large Entity Fee Code	Fee (\$)	Fee Description
1051	130	2051	65	Surcharge - late filing fee or oath
1052	50	2052	25	Surcharge - late Provisional filing
1053	130	1053	130	Non-English specification
1812	2520	1812	2520	For filing a request for ex parte Reexamination
1804	920*	1804	820*	Requesting publication of SIR prior to Examiner action
1805	1840*	1805	1840*	Requesting publication of SIR after Examiner action
1251	110	2251	55	Extension for reply within first month
1252	420	2252	210	Extension for reply within second month
1253	950	2253	475	Extension for reply within third month
1254	1480	2254	740	Extension for reply within fourth month
1255	2010	2265	1005	Extension for reply within fifth month
1401	330	2401	165	Notice of Appeal
1402	330	2402	185	Filing a brief in support of an appeal
1403	290	2403	145	Request for oral hearing
				Petition to institute a public use proceeding
1451	1510	1451	1510	Petition to revive - unavoidable
1452	110	2452	55	Petition to revive - unintentional
1453	1330	2453	665	Utility issue fee (or reissue)
1501	1330	2501	665	Design issue fee
1502	480	2502	240	Plant issue fee
1503	840	2503	320	Petitions to the Commissioner
1460	130	1460	130	Petitions to the Commissioner
1807	60	1807	50	Processing fee under 37 CFR 1.17(q)
1808	180	1806	180	Submission of IDS
8021	40	8021	40	Recording each patent assignment per property (does not include filing fee)
1809	770	2809	385	Filing a submission after final rejection (37 CFR § 1.129(a))
1810	770	2810	385	For each additional invention to be examined (37 CFR § 1.129(b))
1801	770	2801	385	Request for Continued Examination (RCE)
1802	900	1802	900	Request for expedited examination of a design application
				Other fee (specify) _____

SUBTOTAL (1) (\$)

## 2. EXTRA CLAIM FEES

Previously Paid**	Extra Claims	Fee from below	Fee Paid
<input type="text"/> - <input type="text"/> 20	= <input type="text"/>	X <input type="text"/> 18	= <input type="text"/>
<input type="text"/> - <input type="text"/> 3	= <input type="text"/>	X <input type="text"/> 86	= <input type="text"/>

## Multiple Dependent

 290 = 

Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee Description
1202	18	2202	9 Claims in excess of 20
1201	84	2201	42 Independent claims in excess of 3
1203	280	2203	140 Multiple dependent claim, if not paid
1204	84	2204	42 * Release independent claims over original patent

1205 18 2205 9 \*Release claims in excess of 20 and over original patent

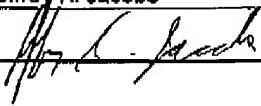
SUBTOTAL (2) (\$)

\*\*or number previously paid, if greater. For Reissues, see above.

SUBTOTAL (3) (\$)

\* Reduced by Basic Filing Fee Paid

## SUBMITTED BY

Name (Print/Type) **Jeffrey K. Jacobs**Registration No. **44,798** Telephone **847-576-5562**Signature Date **September 30, 2004**